## PENDLETON CO. RECREATION 2<sup>ND</sup> & 3<sup>RD</sup> GRADE BOY'S/GIRL'S INSTRUCTIONAL YOUTH BASKETBALL REGISTRATION FORM

## \*\*THIS IS AN INSTRUCTIONAL LEAGUE THAT WILL FOCUS ON TEACHING THE FUNDAMENTALS OF BASKETBALL.\*\*

Registration Fee; \$50.00 per participant, \$125.00 for a family with 3 or more participants

Participant's Name:			Gender:   Male  Femal	le
List Allergies:	Grade:		School:	
Parent/Legal Guardian's Name:			Cell Phone:	
Address:		Em	n. Phone:	
E-mail Address:				
Emergency Contact if pa	arent/guardian listed	d above canno	t be reached:	
Name:	Relat	ionship to Part	icipant:	
hone: □ Home □ Work □ Cell				
	=	o.n		
Shirt Size: Yth. Medium Yth. Large Ad. Sm	all Ad. Medium	Ad. Large	Ad. X-Large	
Registration Fee: \$50.00 per pa	rticipant, \$125.00 fc	or a family with	3 or more participants.	
<u>Du</u>	ue Date: December	7, 2009		
Late Fee of \$15.	00 will be added aft	er December 7	<u>7, 2009.</u>	
Make Checks	payable to: Pendle	ton Co. Recre	ation_	
Participants will not be adde	ed to a roster until a	II registration f	ees are paid in full.	
Elementery program will	he held at Southe	rn Elementer	on Caturday marnings	
Elementary program will	be neid at Souther	in Elementary	on Saturday mornings.	
<ul> <li>As the parent/legal guardian of the player nam during the current season. I agree that the part keep the participant from taking part in these a transportation to and from the activities and do Pendleton County Recreation, the organizers, from activities for any claim arising out of any i</li> <li>All participants must have health insurance in the country of the player named to the participants of the player named to the participants of the player named to the play</li></ul>	ticipant is in good phy activities. I assume all b hereby waive, releas sponsors, supervisors injury to my child.	sical condition a risks and hazard e, absolve, and s, participants, a	nd has no disease or injury that would ds incidental to such participation inclu indemnify, and agree to hold harmless nd persons transporting my child to ar	l ıding s
<ul> <li>All participants must have health insurance in force by the registration date. I,, have adequate insurance coverage to protect my interests and the interests of the named child in connection with the named activities. Pendleton Co. Recreation Youth basketball will not be responsible for injuries or loss of property.</li> </ul>				
o All participants must have a physical on file with Pendleton Co. Recreation before the first practice.				
<ul> <li>I have read, understand and agree to abide by</li> <li>□ Yes</li> </ul>	the parent/player cod □ No	de of conduct list	ed on the back of this form.	
Parent/Legal Guardian	_	Date		_
For Office Use Only				
Amount Paid: Check: ○ Cash: ○ D	ate:		Mail to: Pendleton Co. Recrea 233 Main S Falmouth, Kentucky 4	treet